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jc973 U.S. PTO

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PTO/SB/05 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	I-2-0203.4US
First Inventor	KWAK, Joseph A.
Title	METHOD FOR PHYSICAL LAYER AUTOMATIC REPEAT REQUEST FOR A SUBSCRIBER UNIT
Express Mail Label No.	EL952273830US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. <input checked="" type="checkbox"/>	Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)
2. <input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27.
3. <input checked="" type="checkbox"/>	Specification [Total Pages 12] (preferred arrangement set forth below) <ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure
4. <input checked="" type="checkbox"/>	Drawing(s) (35 U.S.C. 113) [Total Sheets 3]
5. <input type="checkbox"/>	Oath or Declaration [Total Pages 2] <ul style="list-style-type: none">a. <input type="checkbox"/> Newly executed (original or copy)b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed)<ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. <input checked="" type="checkbox"/>	Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. <input type="checkbox"/>	CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. <input type="checkbox"/>	Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Form (CRF)b. Specification Sequence Listing on:<ul style="list-style-type: none">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); orii. <input type="checkbox"/> paperc. <input type="checkbox"/> Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. <input type="checkbox"/>	Assignment Papers (cover sheet & document(s))
10. <input type="checkbox"/>	37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney
11. <input type="checkbox"/>	English Translation Document (if applicable)
12. <input checked="" type="checkbox"/>	Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
13. <input type="checkbox"/>	Preliminary Amendment
14. <input checked="" type="checkbox"/>	Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. <input type="checkbox"/>	Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. <input type="checkbox"/>	Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. <input type="checkbox"/>	Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

<input type="checkbox"/> Continuation	<input checked="" type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part (CIP)	of prior application No.: 09 / 939,410
Prior application information: Examiner Not Yet Known			Group Art Unit: 2681

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/>	Customer Number or Bar Code Label	24374 (Insert Customer No. or Attach bar code label here)	or <input type="checkbox"/> Correspondence address below
Name	VOLPE AND KOENIG, P.C. DEPT ICC		
Address			
City	State	Zip Code	
Country	Telephone	Fax	

Name (Print/Type)	Gerald B. Halt, Jr.	Registration No. (Attorney/Agent)	37,633
Signature			Date 2/27/02

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**FEE TRANSMITTAL
for FY 2002**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)**740.00****Complete if Known**

Application Number	Not Yet Known
Filing Date	Not Yet Known
First Named Inventor	KWAK, Joseph A.
Examiner Name	Not Yet Known
Group Art Unit	Not Yet Known
Attorney Docket No.	I-2-0203.4US

METHOD OF PAYMENT

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **09-0435**Deposit Account Name **InterDigital Comm. Corp.**

- ☒
- Charge any Deficiencies or Credit any Overpayment in the Total Fees Associated With This Communication

☐ Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☐
- Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	201	740	370			Utility filing fee	740.00
106	206	330	165			Design filing fee	
107	207	510	255			Plant filing fee	
108	208	740	370			Reissue filing fee	
114	214	160	80			Provisional filing fee	

SUBTOTAL (1) (\$)**740.00****2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
9	20** = 0	X	0
2	3** = 0	X	0
Multiple Dependent			0

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	203	18	9			Claims in excess of 20
102	202	84	42			Independent claims in excess of 3
104	204	280	140			Multiple dependent claim, if not paid
109	209	84	42			** Reissue independent claims over original patent
110	210	18	9			** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)**0**

**or number previously paid, if greater; For Reissues, see above

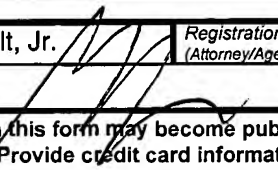
FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
105	205	130	65			Surcharge - late filing fee or oath	
127	227	50	25			Surcharge - late provisional filing fee or cover sheet	
139	139	130	130			Non-English specification	
147	147	2,520	2,520			For filing a request for ex parte reexamination	
112	112	920*	920*			Requesting publication of SIR prior to Examiner action	
113	113	1,840*	1,840*			Requesting publication of SIR after Examiner action	
115	115	110	55			Extension for reply within first month	
116	116	400	200			Extension for reply within second month	
117	117	920	460			Extension for reply within third month	
118	118	1,440	720			Extension for reply within fourth month	
128	128	1,960	980			Extension for reply within fifth month	
119	119	320	160			Notice of Appeal	
120	120	320	160			Filing a brief in support of an appeal	
121	121	280	140			Request for oral hearing	
138	138	1,510	1,510			Petition to institute a public use proceeding	
140	140	110	55			Petition to revive - unavoidable	
141	141	1,280	640			Petition to revive - unintentional	
142	142	1,280	640			Utility issue fee (or reissue)	
143	143	460	230			Design issue fee	
144	144	620	310			Plant issue fee	
122	122	130	130			Petitions to the Commissioner	
123	123	50	50			Processing fee under 37 CFR 1.17(q)	
126	126	180	180			Submission of Information Disclosure Stmt	
581	581	40	40			Recording each patent assignment per property (times number of properties)	
146	146	740	370			Filing a submission after final rejection (37 CFR § 1.129(a))	
149	149	740	370			For each additional invention to be examined (37 CFR § 1.129(b))	
179	179	740	370			Request for Continued Examination (RCE)	
169	169	900	900			Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**0****SUBMITTED BY**

Name (Print/Type)	Gerald B. Halt, Jr.	Registration No. (Attorney/Agent)	37,633	Telephone	215-568-6400
Signature		Date	2/27/02		

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